

ASSEMBLY BILL

No. 2480

Introduced by Assembly Member V. Manuel Pérez

February 24, 2012

An act to amend Section 1179 of the Health and Safety Code, relating to rural health.

LEGISLATIVE COUNSEL'S DIGEST

AB 2480, as introduced, V. Manuel Pérez. Rural health.

Existing law makes various findings and declarations of the Legislature regarding the need to improve and facilitate access to health services in rural areas.

This bill would add to those findings and declarations that rural areas have a shortage of health care professionals with the cultural competency necessary to address the health needs of diverse communities. The bill would also make related nonsubstantive changes.

Vote: majority. Appropriation: no. Fiscal committee: no.
State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 1179 of the Health and Safety Code is
- 2 amended to read:
- 3 1179. The Legislature finds and declares all of the following:
- 4 (a) Outside of California's four major metropolitan areas, the
- 5 majority of the state is rural. In general, the rural population is
- 6 older, sicker, poorer, and more likely to be unemployed, uninsured,
- 7 or underinsured. *Rural areas also have a shortage of health care*
- 8 *professionals who have the cultural competency necessary to*

1 *adequately address the health needs of diverse communities.* The
2 lack of primary care, specialty providers, and transportation
3 continue to be significant barriers to access to health services in
4 rural areas.

5 (b) There is no coordinated or comprehensive plan of action
6 for rural health care in California to ensure the health of
7 ~~California's rural residents~~ *Californians residing in rural areas.*
8 Most of the interventions that have taken place on behalf of rural
9 communities have been limited in scope and purpose and were not
10 conceived or implemented with any comprehensive or systematic
11 approach in mind. Because health planning tends to focus on
12 approaches for population centers, the unique needs of rural
13 communities may not be addressed. A comprehensive plan and
14 approach is necessary to obtain federal support and relief, as well
15 as to realistically institute state and industry interventions.

16 (c) Rural communities lack the resources to make the transition
17 from present practices to managed care, and to make other changes
18 that may be necessary as the result of health care reform efforts.
19 With numerous health care reform proposals being debated and
20 with the extensive changes in the current health care delivery
21 system, a comprehensive and coordinated analysis must take place
22 regarding the impact of these proposals on rural areas.

23 (d) Rural areas lack the technical expertise and resources to
24 improve and coordinate their local data collection activities, which
25 are necessary for well-targeted health planning, program
26 development, and resource development. Data must be available
27 to local communities to enable them to plan effectively.

28 (e) The Legislature recognizes the need to take a comprehensive
29 approach to strengthen and coordinate rural health programs and
30 health care delivery systems in order to *accomplish both of the*
31 *following:*

32 (1) Facilitate access to ~~high-quality~~ *high-quality* health care for
33 California's rural communities.

34 (2) Promote coordinated planning and policy development
35 among state departments and between the ~~State~~ *state* and local
36 public and private providers.